



**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to:

"Commissioner for Patents"  
P.O. Box 1450  
Alexandria, VA 22313-1450

on April 27, 2004

Milton L. Honig  
MILTON L. HONIG  
Reg. No. 28,617  
Attorney for Applicant(s)

4/27/04  
Date of  
Signature

**J6650(C)  
99-0492-HC**

**PATENT**

**RESPONSE UNDER 37 CFR 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP #** 1617

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Customer Number: 000201  
Attorney Docket No.: **J6650(C)**  
Applicant: Fan et al.  
Serial No.: 10/001,558  
Filed: October 24, 2001  
FOR: PERSONAL CLEANSING COMPOSITIONS THAT  
CONTAIN SURFACTANTS, CO-SURFACTANTS, WATER  
INSOLUBLE SOLIDS AND/OR LIQUIDS AND CATIONIC  
CONDITIONING POLYMERS  
UNUS No.: 99-0492-HC

Group: 1617  
Examiner: Shaojia A. Jiang

Edgewater, New Jersey 07020  
April 21, 2004

**AMENDMENT AFTER FINAL ACTION UNDER 37 C.F.R. § 1.116**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated April 7, 2004, please amend the above-identified patent application as follows.

**J6650(C)**  
**99-0492-HC**

**Amendments to the Claims** are reflected in the listing of claims which begins on page 3 of this paper.

**Remarks/Arguments** begin on page 8 of this paper.

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UNITED STATES DEPT. OF COMMERCE  
Patent and Trademark Office

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**RESPONSE UNDER 37 CFR 1.116**  
**EXPEDITED PROCEDURE**  
**EXAMINING GROUP #** 1617

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UNUS No.: 99-0492-HC

Group: 1617  
Examiner: Mojdeh Bahar

Edgewater, New Jersey 07020  
April 21, 2004

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an AMENDMENT AFTER FINAL ACTION in the above-identified application.  
 No additional fee is required.

The fee has been calculated as shown below.

CLAIMS AS AMENDED

	(2) * Claims Remaining After Amendment		(4)** Highest No. Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims		Minus			\$ 18.00	
Independent Claims		Minus			\$ 84.00	
Multiple Claims					\$ 280.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$

\*If the entry in Column (2) is less than the entry in Column (4), write "0" in Column (5).

\*\*If the "Highest No. Previously Paid For" is less than "20," write "20" in this space.

Charge \$\_\_\_\_\_ to Deposit Acct. #12-1155. Triplicate copies of this letter are enclosed.  
 The Commissioner is hereby authorized to charge any additional fees, which may be required to our deposit account No. 12-1155, including all required fees under

37 C.F.R. § 1.16;  
 37 C.F.R. § 1.17;  
 37 C.F.R. § 1.18.

Triplicate copies of this letter are enclosed.

MLH/sm  
(201) 840-2403

*Milton L. Honig*  
Milton L. Honig  
Attorney of Record  
Reg. #28,617